This form is effective beginning with the January 1 to June 30, 2017, accounting period (2017/1)

If you are filing for a prior accounting period, contact the Licensing Division for the correct form.

SA1-2E Short Form

STATEMENT OF ACCOUNT

for Secondary Transmissions by Cable Systems (Short Form)

General instructions are located in the first tab of this workbook.

FOR COPYRIGHT	FOFFICE USE ONLY
DATE RECEIVED	AMOUNT
3-13-24	\$ ALLOCATION NUMBER

Return completed workbook by email to

coplicsoa@copyright.gov

For additional information, contact the U.S. Copyright Office Licensing Division at (202) 707-8150.

Α	ACC	DUNTING PERIOD COVERED BY THIS STATEMENT: (YYYY/(Period))
		Period 1 = January 1 - June 30 Period 2 = July 1 - December 31
		Barcode Data Filing Period (optional - see instructions)
Accounting		
Period		
В		Instructions: Give the full legal name of the owner of the cable system. If the owner is a subsidiary of another corporation, give the full corporate title of the subsidiary, not that of the parent corporation.
Owner		List any other name or names under which the owner conducts the business of the cable system.
		If there were different owners during the accounting period, only the owner on the last day of the accounting period should submit a single statement of account and royalty fee payment covering the entire accounting period.
		Check here if this is the system's first filing. If not, enter the system's ID number assigned by the Licensing Division.
		LEGAL NAME OF OWNER/MAILING ADDRESS OF CABLE SYSTEM
		AMERICAN SAMOA ENTERTAINMENT, INC.
		BUSINESS NAME(S) OF OWNER OF CABLE SYSTEM (IF DIFFERENT)
		MAILING ADDRESS OF OWNER OF CABLE SYSTEM
		P.O. BOX 478
		(Number, street, rural route, apartment, or suite number) PAGO PAGO, AS 96799
		(City, town, state, zip)
С		RUCTIONS: In line 1, give any business or trade names used to identify the business and operation of the system unless these
	names	s already appear in space B. In line 2, give the mailing address of the system, if different from the address given in space B.
System	1	IDENTIFICATION OF CABLE SYSTEM:
		MAILING ADDRESS OF CABLE SYSTEM:
	2	(Number, street, rural route, apartment, or suite number)
		(City, town, state, zip code)

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

Accounting Period:	2023/2	
		FORM SA1-2E. PAGE 1b.
Name	LEGAL NAME OF OWNER OF CABLE SYSTEM:	SYSTEM ID#
- Tunio	AMERICAN SAMOA ENTERTAINMENT, INC.	40756
D	Instructions: List each separate community served by the cable system. A "community separate and distinct community or municipal entity (including unincorporated community or municorporated areas)." 47 C.F.R. 76.5(dd). The first community that you list will ser community." Please use it as the first community on all future filings. Note: Entities and properties such as hotels, apartments, condominiums, or mobile	munities within unincorporated areas and including single, discrete ve as a form of system identification hereafter known as the "first
Area Served	city.	
	CITY OR TOWN	STATE AMERICAN SAMOA
First Community	PAGO PAGO	AMERICAN SAWUA
Add Rows as Necessary		

Accounting Period: 2023/2

FORM SA1-2E. PAGE 2.

Name

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID# 40756

AMERICAN SAMOA ENTERTAINMENT, INC.

E

Secondary Transmission Service: Subscribers and Rates

SECONDARY TRANSMISSION SERVICE: SUBSCRIBERS AND RATES

In General: The information in space E should cover all categories of secondary transmission service of the cable system, that is, the retransmission of television and radio broadcasts by your system to subscribers. Give information about other services (including pay cable) in space F, not here. All the facts you state must be those existing on the last day of the accounting period (June 30 or December 31, as the case may be).

Number of Subscribers: Both blocks in space E call for the number of subscribers to the cable system, broken down by categories of secondary transmission service. In general, you can compute the number of subscribers in each category by counting the number of billings in that category (the number of persons or organizations charged separately for the particular service at the rate indicated—not the number of sets receiving service).

Rate: Give the standard rate charged for each category of service. Include both the amount of the charge and the unit in which it is generally billed. (Example: "\$20/mth"). Summarize any standard rate variations within a particular rate category, but do not include discounts allowed for advance payment.

Block 1: In the left-hand block in space E, the form lists the categories of secondary transmission service that cable systems most commonly provide to their subscribers. Give the number of subscribers and rate for each listed category that applies to your system. **Note:** Where an individual or organization is receiving service that falls under different categories, that person or entity should be counted as a subscriber in each applicable category. Example: a residential subscriber who pays extra for cable service to additional sets would be included in the count under "Service to the first set" and would be counted once again under "Service to additional set(s)."

Block 2: If your cable system has rate categories for secondary transmission service that are different from those printed in block 1 (for example, tiers of services that include one or more secondary transmissions), list them, together with the number of subscribers and rates, in the right-hand block. A two- or three-word description of the service is sufficient.

BL	OCK 1	BLOCK 2			
CATECORY OF SERVICE	NO. OF	DATE	CATECORY OF SERVICE	NO. OF	DATE
CATEGORY OF SERVICE	SUBSCRIBERS	RATE	CATEGORY OF SERVICE	SUBSCRIBERS	RATE
Residential:					
 Service to first set 	1,269	55.99			
 Service to additional set(s) 	278	28.00			
 FM radio (if separate rate) 					
Motel, hotel	0	10.00			
Commercial					
Converter					
Residential					
Non-residential					
					l

F

Services Other Than Secondary Transmissions: Rates

SERVICES OTHER THAN SECONDARY TRANSMISSIONS: RATES

In General: Space F calls for rate (not subscriber) information with respect to all your cable system's services that were not covered in space E, that is, those services that are not offered in combination with any secondary transmission service for a single fee. There are two exceptions: you do not need to give rate information concerning (1) services furnished at cost or (2) services or facilities furnished to nonsubscribers. Rate information should include both the amount of the charge and the unit in which it is usually billed. If any rates are charged on a variable per-program basis, enter only the letters "PP" in the rate column.

Block 1: Give the standard rate charged by the cable system for each of the applicable services listed.

Block 2: List any services that your cable system furnished or offered during the accounting period that were not listed in block 1 and for which a separate charge was made or established. List these other services in the form of a brief (two- or three-word) description and include the rate for each.

	BLO	CK 1		BLOCK 2	•
CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE	CATEGORY OF SERVICE	RATE
Continuing Services:		Installation: Non-residential			
• Pay cable	9.99	Motel, hotel			
 Pay cable—add'l channel 	-	Commercial			
Fire protection		• Pay cable			
•Burglar protection		Pay cable-add'l channel			
Installation: Residential		Fire protection			
• First set	50.00	Burglar protection			
Additional set(s)	50.00	Other services:			
• FM radio (if separate rate)		Reconnect	10.00		
Converter		Disconnect			
		Outlet relocation	50.00		
		Move to new address	50.00		

Accounting Period: 2023/2 FORM SA1-2E. PAGE 3. LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# Name 40756

G

Primary Transmitters: Television

PRIMARY TRANSMITTERS: TELEVISION

1. CALL SIGN

AMERICAN SAMOA ENTERTAINMENT, INC.

In General: In space G, identify every television station (including translator stations and low power television stations) carried by your cable system during the accounting period, except (1) stations carried only on a part-time basis under FCC rules and regulations in effect on June 24, 1981, permitting the carriage of certain network programs [sections 76.59(d)(2) and (4), 76.61(e)(2) and (4), or 76.63 (referring to 76.61(e)(2) and (4))]; and (2) certain stations carried on a substitute program basis, as explained in the next paragraph.

Substitute Basis Stations: With respect to any distant stations carried by your cable system on a substitute program basis under specific FCC rules, regulations, or authorizations:

- Do not list the station here in space G—but do list it in space I (the Special Statement and Program Log)—if the station was carried *only* on a substitute basis.
- · List the station here, and also in space I, if the station was carried both on a substitute basis and also on some other basis. For further information concerning substitute basis stations, see page (v) of the general instructions,

Column 1: List each station's call sign. Do not report origination program services such as HBO, ESPN, etc. Identify each multicast stream associated with a station according to its over-the-air designation. For example, report multistream "WETA-2" as the same on the form.

Column 2: Give the channel number the FCC assigned to the television station for broadcasting over the air in its community of license. For example, WRC is channel 4 in Washington, D.C.

Column 3: Indicate in each case whether the station is a network station, an independent station, or a noncommercial educational station, by entering the letter "N" (for network), "N-M" (for network multicast), "I" (for independent), "I-M" (for independent multicast), "E" (for noncommercial educational), or "E-M" (for noncommercial educational multicast). For the meaning of these terms, see page (iv) of the general instructions in the paper SA1-2 form.

Column 4: Give the location of each station. For U.S. stations, list the community to which the station is licensed by the FCC. For Mexican or Canadian stations, if any, give the name of the community with which the station is identified.

2. B'CAST CHANNEL NUMBER

KVZK	2	Е	AMERICAN SAMOA
K11UU	11	I	AMERICAN SAMOA
KKHJ	13	I	AMERICAN SAMOA

3. TYPE OF STATION

4. LOCATION OF STATION

Add Rows as Necessary

LEGAL NAME OF OWNER OF CABLE SYSTEM:

SYSTEM ID#

AMERICAN SAMOA ENTERTAINMENT, INC.

40756

PRIMARY TRANSMITTERS: RADIO

In General: List every radio station carried on a separate and discrete basis and list those FM stations carried on an all-band basis whose signals were generally receivable by your cable system during the accounting period.

Н

Special Instructions Concerning All-Band FM Carriage: Under Copyright Office regulations, an FM signal is generally receivable if (1) it is carried by the system whenever it is received at the system's headend, and (2) it can be expected, on the basis of monitoring, to be received at the headend, with the system's FM antenna, during certain stated intervals. For detailed information about the Copyright Office regulations on this point, see page (v) of the general instructions in the. paper SA1-2 form.

Primary Transmitters: Radio

Column 1: Identify the call sign of each station carried.

Column 2: State whether the station is AM or FM.

Column 3: If the radio station's signal was electronically processed by the cable system as a separate and discrete signal, indicate this by placing a check mark in the "S/D" column.

Column 4: Give the station's location (the community to which the station is licensed by the FCC or, in the case of Mexican or Canadian stations, if any, the community with which the station is identified).

CALL SIGN
KSBS FM PAGO PAGO KKHJ FM PAGO PAGO I I I I I I I I I I I I I I I I I I
KKHJ FM PAGO PAGO

Accounting Perio	d: 2023/2					FOF	RM SA1-2E. PAGE 5.
Name	LEGAL NAME OF OWNER OF						SYSTEM ID#
Name	AMERICAN SAMOA EN	NTERTAIN	IMENT, INC.				40756
	SUBSTITUTE CARRIAGE	: SPECIA	L STATEMEN	T AND PROGRAM LOG	i		
I	In General: In space I, identi substitute basis during the a						
Substitute	explanation of the programm						
Carriage: Special	1. SPECIAL STATEMENT						
Statement and	During the accounting per		r cable system	carry, on a substitute bas	is, any nonne		
Program Log	broadcast by a distant sta				" 2.4 "	YES	NO
	Note: If your answer is "No log in block 2.	," leave the	rest of this pag	e blank. If your answer is	"Yes," you mu	ust complete the progra	ım
	2. LOG OF SUBSTITUTE	PROGRA	MS				
	In General: List each subst				wherever pos	sible, if their meaning i	S
	Column 1: Give the title	of every no	nnetwork televi	sion program ("substitute			
	period, was broadcast by a under certain FCC rules, re						
	Do not use general categor "NBA Basketball: 76ers vs.		vies" or "baske	tball." List specific prograr	n titles, for ex	ample, "I Love Lucy" or	
	Column 2: If the program	n was broad		"Yes." Otherwise enter "N			
		0		sting the substitute progra e community to which the		nsed by the FCC or. in	
	the case of Mexican or Can	adian statio	ns, if any, the o	community with which the	station is ider	ntified).	
	first. Example: for May 7 give	•	wnen your syst	em carried the substitute	program. Use	numerals, with the mo	ontn
	Column 6: State the time to the nearest five minutes.			gram was carried by your	•		ely
	stated as "6:00-6:30 p.m."	·	. •	•	•	•	
	to delete under FCC rules a			was substituted for progra			
	was substituted for progran	nming that y		0.			
	effect on October 19, 1976.				П		_
		II IRSTITI IT	E PROGRAM		1 1	EN SUBSTITUTE IAGE OCCURRED	7. REASON FOR
	TITLE OF PROGRAM	2. LIVE?	3. STATION'S		5. MONTH	6. TIMES	DELETION
	1. 11122 31 1 1 1 3 3 1 3 1 3 1	Yes or No	CALL SIGN	4. STATION'S LOCATION	AND DAY	FROM — TO	
		 					
							
						<u> </u>	
		 				<u> </u>	
		 					
		 					
		 					
		 					
		 					
		 					
		 					
		†					
		 				_	
						_	
						_	
		 			1		

Name	counting Period:	2023/2				SA1-2E. PAGE
Instructions: The figure you give in this space determines the form you file and the amount you puy. Enter the Istal of all amounts (gross receipts) paid to you carebal system by subscribes for the system's secondary transmissors service (as identified in spece E). Justing the ecounting period. You is further explanation of how to compute this amount, see part of the secondary transmissors service(s). Copyright is accounting period. COPYRIGHT ROYALTY FEE	Name					SYSTEM ID 4075
COPYRIGHT ROYALTY FEE Instructions: To compute the royally fee you own. Copyright Royalty Fee Instructions: To compute the royally fee you own. Use block if if the amount of gross receipts in space K is in the thin State of the state of		Instructions: The figure you give in this space determines the form you file an all amounts (gross receipts) paid to your cable system by subscribers for the s (as identified in space E) during the accounting period. For a further explanatio page (vii) of the general instructions located in the paper SA1-2 form. Gross receipts from subscribers for secondary transmission service(s) during the accounting period.	ystem's sen of how to	econdary transm o compute this a	nission service mount, see	e
Instructions: To compute the troyally fee you ove: Complete block 1, block 2, or block 3. - Use block 1 if the amount of gross receipts in space K is \$137,100 or less Use block 3 if the amount of gross receipts in space K is more than \$137,100 but less than or equal to \$263,800 Use block 3 if the amount of gross receipts in space K is more than \$257,000 Vice block 3 if the amount of gross receipts in space K is more than \$253,800 but less than \$527,000 Vice block 3 if the amount of gross receipts in space K is more than \$253,800 but less than \$527,000 Vice block 3 if the amount of gross receipts of \$137,100 or less Vice block 3 if the amount of gross receipts of \$137,100 or less Vice block 3 if the amount of gross receipts of \$137,100 or less, the royally fee that you must pay for this six-month accounting period is \$52,00 Vice Park 1 in the special of \$52,00 Vice Park 2 in the special		IMPORTANT: You must complete a statement in space P concerning gross re	ceipts.		(Amount of	gross receipts)
Instructions: As a cable system with gross receipts of \$137,100 or less, the royalty fee that you must pay for this six-month accounting period is \$52.00. Line 1. Royalty fee for accounting period	., .	Instructions: To compute the royalty fee you owe: Complete block 1, block 2, or block 3. Use block 1 if the amount of gross receipts in space K is \$137,100 or less. Use block 2 if the amount of gross receipts in space K is more than \$137,100 less. Use block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts in space K is more than \$263,800 less block 3 if the amount of gross receipts block 3 if the amount of g	out less th	an \$527,600.	263,800.	
accounting period a \$52.00. Line 1. Royalty fee for accounting period Line 2. Interest charge. Enter the amount from line 4, space Q, page 8		BLOCK 1: GROSS RECEIPTS OF \$137	,100 OR	LESS		
Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 1 and 2 BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100) 1. Base amount under statutory formula. \$ 263,800.00 2. Enter amount of gross receipts from space K. 3. Subtract line 2 from line 1. 4. Enter the amount of gross receipts from space K. 5. Enter the amount from line 3. 6. Subtract line 5 from line 4. 7. Multiply line 6 by .005 (enter figure here). 8. Interest charge. Enter the amount from line 4, space Q, page 8. DLOCK 3. GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) 1. Enter the amount of gross receipts from space K. \$ 446,251.71 2. Base amount under statutory formula. \$ 263,800.00 3. Subtract line 2 from line 1. 4. Multiply line 3 by .01. \$ 182,451.71 4. Multiply line 3 by .01. \$ 1,824.52 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula). \$ 1,319.00 6. Interest charge. Enter the amount from line 4, space Q, page 8. 0.00 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6. \$ 3,143.52 FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above). \$ 3,143.52 EFIT Trace # or TRANSACTION ID # 76651344924		accounting period is \$52.00.	·			
BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LESS (but more than \$137,100) 1. Base amount under statutory formula \$263,800.00 2. Enter amount of gross receipts from space K. 3. Subtract line 2 from line 1 4. Enter the amount form line 3. 6. Subtract line 5 from line 4. 7. Multiply line 6 by .005 (enter figure here). 8. Interest charge. Enter the amount from line 4, space Q, page 8. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) 1. Enter the amount of gross receipts from space K. 2. Base amount under statutory formula \$263,800.00 3. Subtract line 2 from line 1 4. Multiply line 3 by .01 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) \$1,319.00 6. Interest charge. Enter the amount from line 4, space Q, page 8. 0.00 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6. \$3,143.52 FILING FEE AND TOTAL REMITTANCE DUE Stiling Fee and 1 Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$3,143.52 EFT Trace # or TRANSACTION ID # 76651944924		Line 2. Interest charge. Enter the amount from line 4, space Q, page 8				0.00
1. Base amount under statutory formula \$ 263,800.00 2. Enter amount of gross receipts from space K. 3. Subtract line 2 from line 1. 4. Enter the amount of gross receipts from space K. 5. Enter the amount from line 3. 6. Subtract line 5 from line 4. 7. Multiply line 6 by .005 (enter figure here). 8. Interest charge. Enter the amount from line 4, space Q, page 8. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) 1. Enter the amount of gross receipts from space K. \$ 446,251.71 2. Base amount under statutory formula \$ 263,800.00 3. Subtract line 2 from line 1 \$ 182,451.71 4. Multiply line 3 by .01 \$ 1,824.52 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) \$ 1,319.00 6. Interest charge. Enter the amount from line 4, space Q, page 8. 0.00 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$ 3,143.52 FILING FEE AND TOTAL REMITTANCE DUE FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$ 3,143.52 2. Filing Fee (See the instructions for more information on filing fee calculations) \$ 20.00 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 3,163.52 EFT Trace # or TRANSACTION ID # 76651944924		Line 3. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add line	es 1 and 2		·	
2. Enter amount of gross receipts from space K		BLOCK 2: GROSS RECEIPTS OF \$263,800 OR LES	S (but mo	ore than \$137,1	00)	
3. Subtract line 2 from line 1 4. Enter the amount of gross receipts from space K 5. Enter the amount from line 3 6. Subtract line 5 from line 4 7. Multiply line 6 by .005 (enter figure here) 8. Interest charge. Enter the amount from line 4, space Q, page 8 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8 BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) 1. Enter the amount of gross receipts from space K \$ 446,251.71 2. Base amount under statutory formula \$ 263,800.00 3. Subtract line 2 from line 1 \$ 182,451.71 4. Multiply line 3 by .01 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) 6. Interest charge. Enter the amount from line 4, space Q, page 8 0.00 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$ 3,143.52 FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) 2. Filing Fee (See the instructions for more information on filing fee calculations) \$ 3,143.52 EFT Trace # or TRANSACTION ID # 76651944924		Base amount under statutory formula	\$	263,800.00		
4. Enter the amount of gross receipts from space K. 5. Enter the amount from line 3. 6. Subtract line 5 from line 4. 7. Multiply line 6 by .005 (enter figure here). 8. Interest charge. Enter the amount from line 4, space Q, page 8. 0.00 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) 1. Enter the amount of gross receipts from space K. \$ 446,251.71 2. Base amount under statutory formula \$ 263,800.00 3. Subtract line 2 from line 1. 4. Multiply line 3 by .01 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) 6. Interest charge. Enter the amount from line 4, space Q, page 8. 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$ 3,143.52 FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) 2. Filing Fee (See the instructions for more information on filling fee calculations) \$ 3,143.52 EFT Trace # or TRANSACTION ID # 76651944924		Enter amount of gross receipts from space K				
5. Enter the amount from line 3 6. Subtract line 5 from line 4 7. Multiply line 6 by .005 (enter figure here) 8. Interest charge. Enter the amount from line 4, space Q, page 8 0.00 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8 BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) 1. Enter the amount of gross receipts from space K \$446,251.71 2. Base amount under statutory formula \$263,800.00 3. Subtract line 2 from line 1 \$182,451.71 4. Multiply line 3 by .01 \$1,319.00 6. Interest charge. Enter the amount from line 4, space Q, page 8 0.00 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$3,143.52 FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$3,143.52 FILING FEE (See the instructions for more information on filing fee calculations) \$20.00 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$3,163.52 EFT Trace # or TRANSACTION ID # 76651944924		3. Subtract line 2 from line 1				
5. Enter the amount from line 3 6. Subtract line 5 from line 4 7. Multiply line 6 by .005 (enter figure here) 8. Interest charge. Enter the amount from line 4, space Q, page 8 0.00 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD, Add lines 7 and 8 BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) 1. Enter the amount of gross receipts from space K \$446,251.71 2. Base amount under statutory formula \$263,800.00 3. Subtract line 2 from line 1 \$182,451.71 4. Multiply line 3 by .01 \$1,319.00 6. Interest charge. Enter the amount from line 4, space Q, page 8 0.00 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$3,143.52 FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$3,143.52 FILING FEE (See the instructions for more information on filing fee calculations) \$20.00 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$3,163.52 EFT Trace # or TRANSACTION ID #76651944924		Enter the amount of gross receipts from space K				
6. Subtract line 5 from line 4 7. Multiply line 6 by .005 (enter figure here). 8. Interest charge. Enter the amount from line 4, space Q, page 8. 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) 1. Enter the amount of gross receipts from space K. 2. Base amount under statutory formula 3. Subtract line 2 from line 1 4. Multiply line 3 by .01 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) 6. Interest charge. Enter the amount from line 4, space Q, page 8 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 5. 3,143.52 FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) 5. 3,143.52 EFT Trace # or TRANSACTION ID # 76651944924				-		-
7. Multiply line 6 by .005 (enter figure here)				·		<u>-</u>
8. Interest charge. Enter the amount from line 4, space Q, page 8. 9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8. BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) 1. Enter the amount of gross receipts from space K. \$ 446,251.71 2. Base amount under statutory formula \$ 263,800.00 3. Subtract line 2 from line 1 4. Multiply line 3 by .01 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) 6. Interest charge. Enter the amount from line 4, space Q, page 8 0.00 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$ 3,143.52 FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$ 3,143.52 2. Filing Fee (See the instructions for more information on filing fee calculations) \$ 3,163.52				-		=
9. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 7 and 8 BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600) 1. Enter the amount of gross receipts from space K. \$ 446,251.71 2. Base amount under statutory formula \$ 263,800.00 3. Subtract line 2 from line 1 \$ 182,451.71 4. Multiply line 3 by .01 \$ 1,824.52 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) \$ 1,319.00 6. Interest charge. Enter the amount from line 4, space Q, page 8 0.00 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$ 3,143.52 FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$ 3,143.52 2. Filing Fee (See the instructions for more information on filing fee calculations) \$ 20.00 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 3,163.52		, , , ,				0.00
BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263,800 (but less than \$527,600)		o. Interest charge. Enter the amount from line 4, space Q, page o				0.00
1. Enter the amount of gross receipts from space K						
2. Base amount under statutory formula \$ 263,800.00 3. Subtract line 2 from line 1 \$ 182,451.71 4. Multiply line 3 by .01 \$ 1,824.52 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) \$ 1,319.00 6. Interest charge. Enter the amount from line 4, space Q, page 8 . 0.00 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$ 3,143.52 FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$ 3,143.52 2. Filling Fee (See the instructions for more information on filing fee calculations) \$ 20.00 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 3,163.52 EFT Trace # or TRANSACTION ID # 76651944924		BLOCK 3: GROSS RECEIPTS OF MORE THAN \$263	,800 (but	less than \$527	(600)	
3. Subtract line 2 from line 1 \$ 182,451.71 4. Multiply line 3 by .01 \$ 1,824.52 5. Royalty due on the first \$263,800 of gross receipts (under statutory formula) \$ 1,319.00 6. Interest charge. Enter the amount from line 4, space Q, page 8 0.00 7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6 \$ 3,143.52 FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above) \$ 3,143.52 2. Filing Fee (See the instructions for more information on filing fee calculations) \$ 20.00 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 3,163.52		Enter the amount of gross receipts from space K	\$	446,251.71		
4. Multiply line 3 by .01		Base amount under statutory formula	\$	263,800.00		
5. Royalty due on the first \$263,800 of gross receipts (under statutory formula)		3. Subtract line 2 from line 1	\$	182,451.71		
6. Interest charge. Enter the amount from line 4, space Q, page 8		4. Multiply line 3 by .01		\$	1,824.52	_
7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4, 5, and 6		Royalty due on the first \$263,800 of gross receipts (under statutory formula)		\$	1,319.00	
FILING FEE AND TOTAL REMITTANCE DUE 1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)		6. Interest charge. Enter the amount from line 4, space Q, page 8			0.00	_
1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)		7. TOTAL ROYALTY FEE PAYABLE FOR ACCOUNTING PERIOD. Add lines 4,	5, and 6		\$	3,143.52
1. Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)		FILING FEE AND TOTAL REMITTANCE DUI				
2. Filing Fee (See the instructions for more information on filing fee calculations) \$ 20.00 3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3 \$ 3,163.52 EFT Trace # or TRANSACTION ID # 76651944924			_			
2. Filing Fee (See the instructions for more information on filing fee calculations)	tal Remittance	Royalty Fee Payable for Accounting Period (from block 1, 2, or 3, above)		\$	3,143.52	-
EFT Trace # or TRANSACTION ID # 76651944924	_ 40	2. Filing Fee (See the instructions for more information on filing fee calculations) .		. \$	20.00	-
		3. TOTAL AMOUNT DUE FOR ACCOUNTING PERIOD. Add lines 2 and 3			\$	3,163.52
Important: Your remittance must be in the form of an electronic payment payable to the Register of Copyrights.		EFT Trace # or TRANSACTION ID #	766	51944924		
		Important: Your remittance must be in the form of an electronic paym	ient payab	le to the Register	of Copyrights	<u>5. </u>

Accounting Period:	2023/2					FORM SA1-2E. PAGE 7.
Name		OWNER OF CABLE SYSTEM: MOA ENTERTAINMENT, II	NC.			SYSTEM ID# 40756
M Channels	to its subscriber	rs, and (2) the cable system's t	otal number of	which the cable system carried to activated channels during the activated channels during the activated channels.		
		al number of channels on which ed television broadcast stations				3
	2 Enter the total	al number of activated channel	s			•
	on which the	cable system carried television	n broadcast sta			85
	and nonbroad	dcast services				
N				TION IS NEEDED (Identify an in-	dividual	
Individual to	we can contact	about this statement of accou	111.)			
Be Contacted for Further	Name	ALA POASA			Telephone	684-699-2759
Information		D 0 D0V 470				
	Address	P.O. BOX 478 (Number, street, rural route, apartn	nent, or suite numb	er)		
		PAGO PAGO, AS 967 (City, town, state, zip)	99			
	Email	apoasa@bluesk	ypacificgroup.	com	Fax (optional	
0	CERTIFICATION	(This statement of account mu	st be certified a	nd signed in accordance with C	opyright Office regulations)	
Certification	• I, the undersigne	ed, hereby certify that (Check on	e, but only one,	of the boxes.)		
	(Owne	r other than corporation or pa	artnership) I am	the owner of the cable system as	s identified in line 1 of space E	3; or
	(Agent	t of owner other than corporation in line 1 of space B and that the		ship) I am the duly authorized age	ent of the owner of the cable s	ystem as identified
	X (Office	er or partner) I am an officer (if		or a partner (if a partnership) of th	e legal entity identified as owr	ner of the cable system
	• I have evernined	in line 1 of space B.	voroby dooloro u	nder penalty of law that all statem	onts of fact contained berain	
		te, and correct to the best of my	-	rmation, and belief, and are mad		
		_	X /s/ J	ustin Tuiasosopo		
			70,0	usun raidosopo		
				nic signature on the line above to co sing an "/s/ signature" (e.g., /s/ Jo	-	
		Typed or printed	name: Jus	tin Tuiasosopo		
			CEO e of official position	held in corporation or partnership)		
		Date:			03/13/2024	

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

FORM SA1-2E. PAGE 8. Accounting Period: 2023/2 LEGAL NAME OF OWNER OF CABLE SYSTEM: SYSTEM ID# 40756 AMERICAN SAMOA ENTERTAINMENT, INC. SPECIAL STATEMENT CONCERNING GROSS RECEIPTS EXCLUSIONS The Satellite Home Viewer Act of 1988 amended Title 17, section 111(d)(1)(A), of the Copyright Act by adding the fol-"In determining the total number of subscribers and the gross amounts paid to the cable system for the basic service of providing secondary transmissions of primary broadcast transmitters, the system shall not include sub-Special Statement scribers and amounts collected from subscribers receiving secondary transmissions pursuant to section 119." **Concerning Gross Receipts Exclusion** For more information on when to exclude these amounts, see the note on page (vii) of the general instructions located in the paper SA1-2 form. During the accounting period, did the cable system exclude any amounts of gross receipts for secondary transmissions made by satellite carriers to satellite dish owners? NO Name Name Mailing Address Mailing Address INTEREST ASSESSMENT You must complete this worksheet for those royalty payments submitted as a result of a late payment or underpayment. For an explanation of interest assessment, see page (viii) of the general instructions located in the paper SA1-2 form. Interest Assessment days x 0.00274 Line 4 Multiply line 3 by 0.00274** and enter here in space L (page 6), block 1, line 2, or block 2, line 8, or block 3, line 6 (interest charge) * To view the interest rate chart click on www.copyright.gov/licensing/interest-rate.pdf. For further assistance please contact the Licensing Division at (202) 707-8150 or licensing@copyright.gov. ** This is the decimal equivalent of 1/365, which is the interest assessment for one day late. NOTE: If you are filing this worksheet covering a statement of account already submitted to the Copyright Office, please list below the owner, address, first community served, ID number, and accounting period as given in the original filing. Owner Address ID number First community served Accounting period

Privacy Act Notice: Section 111 of Title 17 of the United States Code authorizes the Copyright Office to collect the personally identifying information (PII) requested on this form in order to process your statement of account. PII is any personal information that can be used to identify or trace an individual, such as name, address, and telephone numbers. By providing PII, you are agreeing to the routine use of it to establish and maintain a public record, which includes appearing in the Office's public indexes and in search reports prepared for the public. The effect of not providing the PII requested is that it may delay processing of your statement of account and its placement in the completed record of statements of account, and it may affect the legal sufficiency of the filing, a determination that would be made by a court of law.

CONTROL #: **REMITTANCE #:**

 \square Accepted

C	Cable Worksheet	Total amount of remittance	Number of SAs rec'	d Initials
		Date of remittance	Check □ EFT	☐ FILING FEES
Cable ID#				Amount Initial
Examined by	Reviewed by	Date examination completed	Allocation number	
Space A Accounting		(enter four digit year and	/1 (for Jan-Jun period) or /2 (for Jul	l-Dec period) No spaces)
Period	☐ Letter sent		☐ Information received	
	☐ Accepted		☐ Phone call/Date/Contact	
Space B Owner				
	☐ Letter sent		☐ Information received	
	☐ Accepted	[Phone call/Date/Contact	
Space D Area Served				
	☐ Letter sent	[☐ Information received	
	□ Accepted	Γ	☐ Phone call/Date/Contact	
Space E Secondary Transission				
Service Subscribers:	☐ Letter sent	Ε	☐ Information received	
and Rates	☐ Accepted		☐ Phone call/Date/Contact	
Space G Primary Transmitters:				
Television	☐ Letter sent]	☐ Information received	
	☐ Accepted]	☐ Phone call/Date/Contact	
Space H Primary Transmitters:				
Radio	□ Assessed	r	Dhana cell/Data/Contact	

 $\hfill\square$ Phone call/Date/Contact

		Carriage
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phone call/Date/Contact	
		Space J Part-time Carriage Log
☐ Letter sent	\Box Information received	(SA3 only)
☐ Accepted	☐ Phone call/Date/Contact	
		Space K Gross Receipts
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phone call/Date/Contact	
		Space L Copyright Filing and Royalty Fees
☐ Royalty Fee should be	☐ Refund request to fiscal	
☐ Letter sent	☐ Information received	
☐ Accepted	☐ Phoe call/Date/Contact	
		C B 4
		Space M Channels
□ Letter sent	☐ Information received	
☐ Letter sent	☐ Information received ☐ Phone call/Date/Contact	
		Channels Space O
☐ Accepted	☐ Phone call/Date/Contact	Channels Space O
☐ Accepted	☐ Phone call/Date/Contact ☐ Information received	Channels Space O
☐ Accepted	☐ Phone call/Date/Contact ☐ Information received	Space O Certification Space P Statement of
☐ Accepted ☐ Letter sent ☐ Accepted	☐ Phone call/Date/Contact ☐ Information received ☐ Phone call/Date/Contact	Space O Certification Space P Statement of
☐ Accepted ☐ Letter sent ☐ Accepted ☐ Letter sent ☐ Letter sent	☐ Phone call/Date/Contact ☐ Information received ☐ Phone call/Date/Contact ☐ Information received	Space O Certification Space P Statement of
☐ Accepted ☐ Letter sent ☐ Accepted ☐ Letter sent ☐ Letter sent	☐ Phone call/Date/Contact ☐ Information received ☐ Phone call/Date/Contact ☐ Information received	Space O Certification Space P Statement of Gross Receipts Space Q Interest